24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)			FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			
			C C00530766
Check if 24-hour report			
Full Name of Payee			Date of Public Distribution/Dissemination
Campaign HQ			M M / D D / Y Y Y Y Y
Mailing Address PO Box 257			10 13 2020 Amount
City	State	Zip Code	8470.00
Brooklyn	IA	52211	Transaction ID : SE.22000 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type	10 13 / Y Y Y Y Y Y
Name of Federal Candidate		✗ Support	Office Sought: House District:
ERNST, JONI K, , ,		Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		139484.54	Disbursement For: Primary 2020
Full Name of Payee			
Campaign HQ			Date of Public Distribution/Dissemination
Mailing Address PO Box 257			10 13 2020
1 0 Box 207			Amount
City	State	Zip Code	8470.00
Brooklyn	IA	52211	Transaction ID : SE.22001 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	Mam / Dad / Yayayay
Phone Calls		Type	10 13 2020
Name of Federal Candidate		Support	Office Sought: House District:
GREENFIELD, THERESA, , ,		X Oppose	President Senate State: IA
Calendar Year-To-Date		447054.54	Disbursement For: Primary General 2020
Per Election for Office Sought		147954.54	Other (specify)
(a) SUBTOTAL of Itemized Independe	nt Expenditures		▶ 16940.00
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.			16940.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Gross, Jennifer, , ,	[Electron	nically Filed] Nate	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		ncally Filea Date	2020